

EXHIBIT A
TO DEFENDANT'S MOTION FOR
SUMMARY JUDGMENT

**OHIO CIVIL RIGHTS COMMISSION
CHARGE OF DISCRIMINATION (EMPLOYMENT)**

ALH

OCRC Case Number: CLE B4 (44821) 08222018

EEOC Case Number:

Your Name	Company Name	
Frank Dundee	University Hospitals Geauga Medical	
Your Street Address	Company Street Address	
7707 Amberwood Trail	13207 Ravenna Rd	
City, State and Zip	City, State and Zip	
Boardman, Ohio 44512	Chardon, Ohio 44024	
Telephone Number	County (if located in Ohio)	
3303988274	Geauga	
Alternate Number (Optional)	Telephone Number	
3307262662	4402856000	
Email Address (Optional)	# of Employees	Date of Hire
fdundee@mail.com	28.000	5/1/2010

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CLEVELAND

Dates of Discrimination (MM/DD/YYYY): 3/21/2018 thru 8/21/2018

I was discriminated on the basis of:

- Race/Color
- Sex
- Disability (DO NOT LIST DISABILITY)
- Age (over 40 years old only)
- Religion
- National Origin/Ancestry
- Military Status
- Retaliation (for protesting discrimination)

Please identify how you are a member of the category you marked on the left: (If you marked AGE, please list your BIRTH DATE. If you have marked DISABILITY, DO NOT IDENTIFY your disability.)
I have a disability

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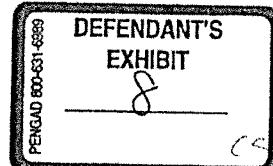
OCRC - INTAKE
CLEVELAND**Please read and review the following:**

I have not commenced with any action under sections 4112.14 or 4112.02(N) of the Ohio Revised Code with respect to the subject matter of the affidavit. I understand that upon filing of this charge with the Ohio Civil Rights Commission, I am barred from instituting any such civil action and that any monetary award or financial benefit I may receive may be limited to back pay and/or restoration of employment fringe benefits and may not include other damages to which I may be entitled as a result of such civil action.

I am filing a charge alleging AGE DISCRIMINATION and I have read and understand the above information.

I am NOT filing a charge alleging AGE DISCRIMINATION and this does not apply to me.

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UH-Dundee 0276

Charging Party: Frank Dundee

ALH

Case Number: CLE B4 (44821) 08222018

Act of Discrimination #1

Date of Discrimination (MM/DD/YYYY): 08/21/2018

I was subjected to (mark only one issue):

- a denial of promotion
- a forced resignation
- demotion
- denial of hire
- denial of a reasonable accommodation
- different terms and conditions of employment
- discharge/termination
- discipline
- harassment/sexual harassment
- layoff
- other

I believe it was because of my:

- Race/Color
- Sex
- Disability
- Age
- Religion
- National Origin/Ancestry
- Military Status
- Protected activity (retaliation)

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The reason given by the company for this action is:

The company, University Hospitals, refused to informally discuss my request(s) for a reasonable accommodation, even though my disability is obvious, forcing me to comply with their internal policy which violates Title I of the ADA rules on reasonable accommodation.

I was given this reason by (name and position):

Debbi Templin, CPDM, ARM Director, Disability & Occupational Risk Control Services, Heather Harmon, JD, PHR, SHRM-CP, Vice President, Human Resources & Organizational Development University Hospitals

I am aware of others treated more favorably than me including:

Lisa Farah

I believe that this was discrimination because:

I am perceived as a troublesome employee, in spite of the fact that my job performance is exemplary, both objectively and subjectively, when compared across all University Hospitals facilities. I believe this discrimination is retaliation for speaking truth to power; for making a complaint to OSHA and complaints to the EEOC, over a period of years. Because of this, my request for reasonable accommodation was rejected without discussion, through an internal University Hospitals policy.

Charging Party: Frank Dundee

ALH

Case Number: CLE B4 (44821) 08222018

Act of Discrimination #2 (Optional)

Date of Discrimination (MM/DD/YYYY):

I was subjected to (mark only one issue):

- a denial of promotion
- a forced resignation
- demotion
- denial of hire
- denial of a reasonable accommodation
- different terms and conditions of employment
- discharge/termination
- discipline
- harassment/sexual harassment
- layoff
- other

I believe it was because of my:

- Race/Color
- Sex
- Disability
- Age
- Religion
- National Origin/Ancestry
- Military Status
- Protected activity (retaliation)

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If you have marked "other", please briefly describe the discriminatory act:

The reason given by the company for this action is:

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I am aware of others treated more favorably than me including:

I believe that this was discrimination because:

Charging Party: Frank Dundee

ALH

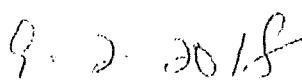
Case Number: CLE B4 (44821) 08222018

Please check to indicate you have read and agreed to the statements below.

- I understand that I will not be able to sign this form on-line. A copy will be mailed out to me for a notarized signature. An investigation will not begin until the Ohio Civil Rights Commission receives a signed and notarized charge from me.
- I declare under penalty of perjury that I have read the above charge and that it is true to the best of my knowledge, information and belief. I will advise the agency/agencies if I change my address or telephone number and that I will cooperate fully in the processing of my charge in accordance to their procedures.

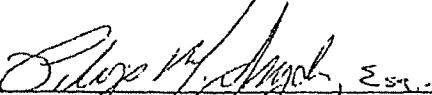


Charging Party



Date

Subscribed and sworn to before me on this 2nd day of September of 20 18



OCRC Representative or Notary

Philip M. Saylor, Esq.
Attorney At Law, OH 0071672
Notary Public, State of Ohio
My commission has no
expiration date 8/147.03 R.C.

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DIVISION

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CLIENT MAIL

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